•		
FRANK M MATHEUS	STATE SELANT	
Candidate's Name (print)	Office	District (if applicable)

Contributions in Excess of \$100 or, When Added Together Exceed \$190

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH	AMOUNT OF EACH CONTRIBUTION(S)	CHECK / CHECK /
The state of the s	CONTRIBUTION		
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FRANK M	MATTLEWS	STATE	SENATIS	5	
Candidate's Name (print)		Office	SENATE	Distri	ct (if applicable)
	Contrib	utions of C	100 - Y		·
	Contifu	nrion2 of 2.	100 or Less		7
-					•
DATE OFEACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	N. C.	DAT OF EA CONTRIB	E CH UTION	AMOUNT OF EACH CONTRIBUTION
8/24	100.00			-	
8/24	\$70.00				
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FRANK M	MATHEWS	STATE SENATE	·····
Candidate's Name (print)	Office		District (if applicable)

Expenses Categories

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	В	<u> </u>
Expenses related to travel	С	<u> </u>
Expenses related to advertising	D	173.10
Expenses related to paid staff	E	,
Expenses related to consultants	F	
Expenses related to polling	G	=
Expenses related to special events	H	95.99
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	560.00

page <u>4</u> of <u>6</u>

FRANK M M. ndidate's Name (print)		Office	District	(if applicable)
		ses in Excess o		ner.
NAME AND ADDRESS OF PER GROUP OR ORGANIZATION RECEIVED THE PAYMENT F EXPENSE(S)	WHO:	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
71P 2950 E ROCHE LU NV 99	74. E 112/	gaz	9/21/00	560.00
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FRANK M	MATHEUS	STARE	SENAR	5
Candidate's Name (print)	(Office		District (if applicable)

Expenses of \$100 or Less

DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE	CATEGORY
9/2	95.97	H
9/4	64.35	D
8/19	10.62	À
9/4	22.20	D
9/3	3,19	D D
2/3/	30.76	<i>D</i>
8/21	41.98	<u> </u>
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DATE	AMOUNT	
DATE OF EACH EXPENSE	OF EACH EXPENSE	CATEGORY
		Transmitted and all the second
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